

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		2,5	03-30-59
FORMALITY REVIEW	JLB	10303	4-7/5-20

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
2	7/25/62
3	8/14/63
4	8/14/63
5	8/14/63
6	8/14/63
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9	8/14/63
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50	8/14/63

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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